

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO.

10600563

FILING DATE

06-19-03

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9		1				
10		1				
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34		1				
35		1				
36	1	1				
37	1					
38	1					
39	1					
40		1				
41		1				
42	1	1				
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	6					
TOTAL DEP.	57					
TOTAL CLAIMS	63					

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
51						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						